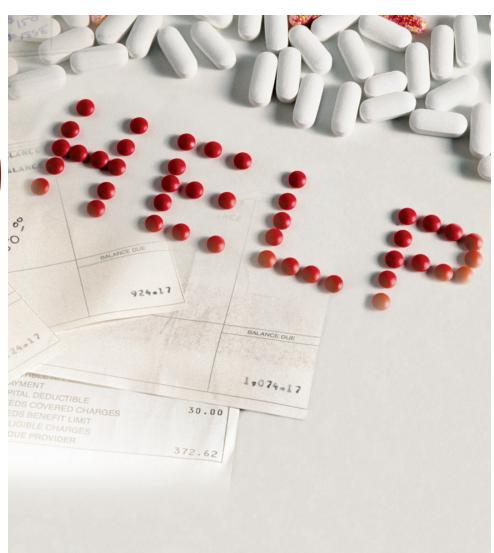
If you have Medicare A or B, you are eligible to enroll in the newest Medicare benefit prescription drug coverage. Choose the plan that works best for you and enroll by May 15, 2006

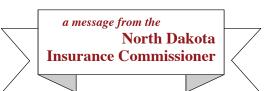


1.888.575.6611



North Dakota Insurance Department
Department 401
State Capitol - Fifth Floor

State Capitol - Fifth Floor 600 East Boulevard Bismarck, ND 58505-0320



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SHIC Provides Free and Confidential Medicare Counseling

If you are eligible for Medicare (65 or over or disabled) or have family members or friends who are, you should know about the North Dakota Senior Health Insurance Counseling (SHIC) program.

SHIC offers free and confidential help with Medicare and other health insurance. Trained counselors who work through local sponsoring organizations

can help answer your questions. SHIC counselors have no connection with any insurance company or product.

What Senior Health Insurance Counselors do for you:

If you are new to Medicare, counselors can explain how it works, what is covered and what costs you are re-

sponsible for.

What if the counselor doesn't know the answer to my question?

SHIC counselors have extensive training and the resources of the ND Insurance Department to call on if a question or problem is beyond their knowledge or experience.



DEPARTMENT OF INSURANCE STATE OF NORTH DAKOTA

600 East Boulevard Avenue Bismarck, ND 58505 Phone: (701) 328-2440 Fax: (701) 328-4880

Dear Friends,

Understanding the paperwork and coverage of Medicare and other related health insurance services can be downright overwhelming at times. That's why the Senior Health Insurance Counseling, or SHIC program provides such a valuable service to North Dakota consumers. Our SHIC volunteer counselors can help alleviate the confusion, find answers to your questions, and provide unbiased information. The service is totally free and completely confidential, and no one involved will ever try to sell you anything.

If you are having difficulty paying for your prescription drugs, please ask about our Prescription Connection for ND program. You may be eligible to receive free or reduced cost medication. We have been able to help 99% of all applicants to the program and are confident we can help you too.

Jim Poolman

Jim Poolman Insurance Commissioner



SHIC Counselors:

- will help you understand the paperwork and statements that you receive after a doctor visit, hospital stay or other medical experience.
- counselors help sort out and reconcile Medicare statements and hospital or clinic bills, and help you figure out what has been paid and what you need to pay.
- can help with claims filing or appeals if payment for a service has been denied.
- can explain your options for private insurance to supplement your Medicare (that is, insurance that covers costs Medicare doesn't.)
- can help you review and understand longterm care insurance and offer you tools to help decide if it is the right choice for you.
- have information on other resources, agencies and organizations that may be of help to you if you have questions about other issues.



Situation #1

You are:

Enrolled in Medicare Part A and/or Part B

Participating in Medicaid through your county social services

Your prescription costs will be transferred from Medicaid to Medicare effective January 1, 2006.

Look for a letter from Medicare explaining this change.

Between November 15-December 31, 2005, you can choose a Medicare Prescription Drug Plan. If you do not make a choice, you will automatically be assigned a plan by the Centers for Medicare and Medicaid Services.

If another plan provides better coverage for your prescription needs, you will be able to switch plans.

Situation #2

You are:

Single with monthly income less than \$1,077 and assets less than \$4,000 and participating in a Medicare Savings Program

OR

A couple with monthly income less than \$1,444 and assets less than \$6,000 and participating in a Medicare Savings program

You will automatically be eligible to receive extra help to pay costs associated with Medicare's prescription drug coverage.

Look for a letter from Medicare explaining this change.

The prescription drug plan you choose is your decision. You must send a completed application to the company between November 15, 2005 and May 15, 2006. If you do not choose a plan during this period, one will be selected for you, **effective June 1, 2006.**

Situation #4

You are:

Single with monthly income less than \$1,197 (150% FPL) and assets less than \$11,500

Situation #3

OR

A couple with monthly income less than \$1,605 (150% FPL) and assets less than \$23,000

You must apply for Extra Help from the Social Security Administration which may decrease the monthly premium for the Medicare Prescription Drug Plan and decrease the deductible plus offer you other financial benefits.

When the Social Security Administration makes a decision on your eligibility for Extra Help, you will receive a notice. If you are eligible for Extra Help, enroll in a Medicare Prescription Drug Plan between November 15, 2005 and May 15, 2006. Send a copy of your eligibility for Extra Help with your enrollment form for the Medicare Prescription Drug Plan that you have selected

You are:

Currently receiving Medicare and Medicaid benefits

AND

Living in a nursing home

If you do not select a plan for yourself, Medicare will automatically enroll you in a drug plan. If the plan includes the drugs you are currently taking, you will pay nothing for your prescriptions.

However, it is important to select your own plan to ensure that the medications that you take are covered under the plan.

A personal representative or a family member may be able to assist you with your decision.



Key Facts about Medicare Prescription Drug Coverage:

- Available to ALL PEOPLE with Medicare
- Helps people with Medicare pay for the prescriptions they need
- It is voluntary, but you may pay a higher premium if you wait to sign up after May 15, 2006

If you need help, please contact:

- Senior Health Insurance Counseling (SHIC) 1.888.575.6611
- Social Security Administration 1.800.772.1213
- Medicare 1.800.Medicare www.medicare.gov

Overview of Low-Income Extra Help Drug Benefits - 2006

2005 Income Amounts	Monthly Premium	Annual Deductible	Copayments
Full-benefit dual eligibles with income <100% of poverty (\$9,570/individual; \$12,830/ couple in 2005)	\$0	\$0	\$1/generic \$3/brand-name; no co-pays after out-of-pock- et drug spending reaches \$3,600 (\$5,100 total)
Full-benefit dual eligibles with income >100% of poverty; and individuals with income <135% of poverty (\$12,920/ individual; \$17,321/couple in 2005) and assets <\$6,000/individual; \$9,000/couple	\$0	\$0	\$2/generic \$5/brand-name; no copays after out-of-pocket drug spending reaches \$3,600 (\$5,100 total)
Individuals with income 135- 150% of poverty (\$12,920- \$14,355/individual; \$19,245/ couple in 2005) and assets <\$11,500/individual; \$23,000/ couple	sliding scale up to ~\$37	\$50	15% of total drug costs up to \$5,100; \$2/generic \$5/brand-name thereafter
Note: Cost-sharing paid by CMS count toward the out-of-pocket threshold. Low income persons who are			

Note: Cost-sharing paid by CMS count toward the out-of-pocket threshold. Low income persons who are institutionalized pay nothing. SOURCE: Kaiser Family Foundation summary of Part D low-income subsidies in 2006.

